

Rec'd PCT/PTO 28 JAN 2005

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-878)

SERIAL NO.

**10/522 716**

FILING DATE

APPLICANT(S)

8-5-05

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2	1		1			
3	1		Cancelled			
4		2		1		
5		2		1		
6		2		1		
7		2		1		
8		2		1		
9		4		1		
10	1		1			
11	1					
12		2				
13		2				
14		2				
15		2				
16		2				
17		4				
18	1		1			
19		1		1		
20		1		1		
21		1		1		
22		1		1		
23		2		1		
24	1		1			
25		1		1		
26		2		1		
27		①		1		
28		①		1		
29		①		1		
30		①		1		
31		1		1		
32		①		1		
33		①		1		
34		①		1		
35	1		1			
36		1		1		
37	1		1			
38	1		1			
39		4		1		
40		4		1		
41		4		1		
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	10		7			
TOTAL DEP.	58		25			
TOTAL CLAIMS	68		32			

4x5  
2x12  
1x14

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
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97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

**BEST AVAILABLE COPY**